

CLAIMS ONLY

Application Number:

Filing Date

0.9/475868

Applicant(s)

| CLAIMS | AS FILED 6/28/04 | | AFTER FIRST AMENDMENT | | AFTER SECOND AMENDMENT | |
|-----------------|---------------------|--------|-----------------------|--------|------------------------|--------|
| | Indep | Depend | Indep | Depend | Indep | Depend |
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| Total Indep | 3 | | | | | |
| Total Depend | 17 | | | | | |
| Total Claims | 20 | | | | | |

| * May be used for additional claims or amendments | | | | | | |
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| Total Indep | | | | | | |
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| Total Claims | | | | | | |